



Office use only

Date received _____

CHESAPEAKE HEALTH DEPARTMENT

748 Battlefield Blvd., North, Chesapeake, VA 23320 Phone (757) 382-8672 Fax (757) 382-8713

Worksheet for **permitted** Temporary Food Vendors operating in Chesapeake

The person named below is currently permitted to operate a temporary food establishment by a local health district of Virginia. Please submit this **worksheet (sign & date the back of this form)**, a copy of your current CFM certificate, health permit and last inspection **at least ten (10) business days prior to the event** for review and approval to ensure your operation does not exceed the conditions of your permit. To expedite the process you can email the required documents to chdenhth@vdh.virginia.gov.

Please use the checklist below as food safety guidance when setting up and operating your booth.

Name of Permit Holder _____ Phone (H) _____
Home Address _____ Phone (W) _____
City _____ State _____ Zip Code _____ Phone (C) _____
E-mail address _____
Name of Organization/Business _____
Commissary Name: _____
Commissary Address: _____
Commissary City: _____ State: _____ Zip Code: _____
Associated Event: _____ Date (s) of Food Sale: _____
Location of Event _____ Time (Hours) of Food Sale: _____

FOODS TO BE SOLD OR DISTRIBUTED

The sale of any home prepared or canned foods is prohibited. Home baked goods such as cakes, cookies, brownies, etc. may possibly be allowed

| | FOOD ITEM | SOURCE (Where purchased) | PREPARATION (where & how) |
|---|-----------|--------------------------|---------------------------|
| 1 | _____ | _____ | _____ |
| 2 | _____ | _____ | _____ |
| 3 | _____ | _____ | _____ |
| 4 | _____ | _____ | _____ |
| 5 | _____ | _____ | _____ |
| 6 | _____ | _____ | _____ |

You May Attach Additional Menu items to this worksheet

Water supplied by (e.g. city, bottled): _____

Wastewater disposal provided by (e.g. event, portable toilets): _____

The following items are also required and must be provided and/or used during the event:

| | |
|--|---|
| ✓ Plastic Food Gloves & Hair restraints | ✓ Handled ice scoop & appropriate food utensils |
| ✓ Sanitizer (Chlorine or Quaternary Ammonia) & appropriate test strips | ✓ Food product & single-service articles kept 6" above the ground |
| ✓ Food thermometer | ✓ Food grade water hose & self-draining coolers |

| | |
|--|---------------------------------------|
| ✓ Complete Hand washing station | ✓ Hot and cold holding equipment |
| ✓ Three-tub set-up (Wash/Rinse/Sanitize) | ✓ Fire Retardant Overhead protection |
| ✓ Fire Retardant Ground Cover | ✓ Sanitizer buckets and wiping cloths |

The Top 6 Causes of Food Poisoning:

- Poor personal hygiene and sick food employees
- Not keeping cold foods at 41°F
- Not keeping hot foods at 135°F
- Not reheating foods to 165°F
- Not cooling hot foods the right way
- Contaminated raw foods and ingredients

Clean Hands For Safe Food:

- Use soap and water
- Wash all surfaces including: back of hands, wrists, between fingers, under fingernails
- Rinse your hands well
- Dry hands with a paper towel
- Turn off the water using paper towel instead of your bare hands

By signing this application, I do hereby agree to comply with the rules and regulations as outlined in 12 VAC 5-421 of the Virginia Food Regulations.

Signed _____ Date _____

Reviewed by _____ Date _____